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SEC 1972 (6/02) Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss o federal exemption. Conversely, failure to file the appropriate federal not result in a loss of an available state exemption unless such exempti predicated on the filing of a federal notice.



SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

APR 12 2007

FORM D

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

UNITED STATES

OMB Number: 3235-0076

Expires: April 30, 2008

Estimated average burden hours per response...16

SEC USE ONLY

Prefix | Serial DATE RECEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series B Preferred Offering Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6) [] ULOE Type of Filing: [x] New Filing [] Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Volicon Inc. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 111 South Bedford Street, Burlington, MA 01803 781-221-7400 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) **Brief Description of Business** Digital video recording and broadcast monitoring Type of Business Organization [x] corporation [] limited partnership, already formed [] other (please specify): [] business trust [] limited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: [02] [04]* [X] Actual [] Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction *initially incorporated in Massachusetts. Reincorporated In Delaware on 04/05.



GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply: [x] Promoter [x] Beneficial Owner [x] Executive Officer [x] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Warsawski, Eli	
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Volicon Inc., 111 South Bedford Street, Burlington, MA 01803	
Check Box(es) that Apply: [x] Promoter [x] Beneficial Owner [x] Executive Officer [x] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Perl, Julius	

Business or Residence Address (Number and Street, City, State, Zip Code) c/o Volicon Inc., 111 South Bedford Street, Burlington, MA 01803
Check Box(es) that Apply: [] Promoter [x] Beneficial Owner [] Executive Officer [x] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Shatz, Paul
Business or Residence Address (Number and Street, City, State, Zip Code) 4243 Lenore Lane N.W., Washington, DC 20008
Check Box(es) that Apply: [] Promoter [x] Beneficial Owner [] Executive Officer [x] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Seelig, Jonathan
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Globespan Capital Partners, One Beacon Place, Suite 2810, Boston, MA 02108
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [x] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Gary Learner
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Volicon Inc., 111 South Bedford Street, Burlington, MA 01803
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [x] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Mark Goodman
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Brookline Venture Partners I LLC, 20 Williams Street, Suite G55, Wellesley, MA 02481
Check Box(es) that Apply: [] Promoter [x] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Nayob Ltd.
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Yehuda Brand, 33 Nezabravka Street, Isgrev, Sofia, Bulgaria
Check Box(es) that Apply: [] Promoter [x] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual) Naftali Investments, Ltd.
Business or Residence Address (Number and Street, City, State, Zip Code) 85 Medinat Hayehudim Street, Herzliya 46140, Israel
Check Box(es) that Apply: [] Promoter [x] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner

Full Name (Last name first, if individual)
Brookline Venture Partners I LLC
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Mark Goodman, 20 Williams Street, Suite G55, Wellesley, MA 02481
Check Box(es) that Apply: [] Promoter [x] Beneficial Owner [] Executive Officer [] Director [] General and/or
Managing Partner
Full Name (Last name first, if individual)
Westwood Revocable Trust
Business or Residence Address (Number and Street, City, State, Zip Code)
c/o Volicon Inc., 111 South Bedford Street, Burlington, MA 01803
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

				В. І	NFORM	IATION	ABOUT	OFFER	ING				
1. Has th	ne issue	r sold, or	does the	issuer int	end to se	ll, to non	-accredit	ed invest	ors in this	offering	?	Yes []	No [x]
		A	Answer al	so in App	endix, C	olumn 2,	if filing	under UL	OE.				[]
				nt that wi wnership					Non	e			
of securi registere	y, any c ities in t d with t ons to be	ommission he offerion he SEC and listed and	on or siming. If a point of wind/or wind associated to the contraction of the contraction	ilar remu erson to b th a state	neration to be listed in or states,	for solicits an associate the n	tation of perciated per ciame of the	purchaser rson or ag ne broker	s in conn gent of a l or dealer	ection was proker or . If more	ith sales	Yes []	No [x]
Full Nam N/A	ne (Last	name fir	st, if ind	vidual)									
Business	or Res	idence A	ddress (N	lumber aı	nd Street,	City, Sta	ite, Zip C	ode)					
Name of	Associ	ated Brol	ker or De	aler									
States in (Check "							icit Purcl	hasers	[] All	States			
[IL] [MT]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	

1. Enter the aggregate offering price of securities included in this offering		
and the total amount already sold. Enter "0" if answer is "none" or "zero." If		
the transaction is an exchange offering, check this box " and indicate in the		
columns below the amounts of the securities offered for exchange and		
already exchanged.	Agamagata	Amount
	Aggregate	
T	Offering Price	Already Sold
Type of Security	•	Φ.
Debt	\$	\$
Equity	\$1,100,507	\$1,100,507
[] Common [X] Preferred		
Convertible Securities (including warrants)	\$	_\$
Partnership Interests	\$	\$ \$ \$
Other (Specify Subscription Receipts at a price).	\$	\$
Total	\$1,100,507	\$1,100,507
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have		
purchased securities in this offering and the aggregate dollar amounts of		
their purchases. For offerings under Rule 504, indicate the number of		
persons who have purchased securities and the aggregate dollar amount of		
their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Aggregate
		Dollar
	Number	Amount
	Investors	of Purchases
Accredited Investors	(1)	\$1,100,507
Non-accredited Investors		\$
Total (for filings under Rule 504 only)		\$
Answer also in Appendix, Column 4, if filing under ULOE.		
, , , , , , , , , , , , , , , , , ,		
3. If this filing is for an offering under Rule 504 or 505, enter the		
information requested for all securities sold by the issuer, to date, in		
offerings of the types indicated, the twelve (12) months prior to the first sale		
of securities in this offering. Classify securities by type listed in Part C-		
Question 1. N/A		
Question 1. IVA	Type of	Dollar
	Security	Amount Sold
Type of offering	Security	Alloult Sold
Rule 505		c
		\$ \$ \$
Regulation A		3
Rule 504		
Total		\$
4. a. Furnish a statement of all expenses in connection with the issuance and		
distribution of the securities in this offering. Exclude amounts relating solely		
to organization expenses of the issuer. The information may be given as		
subject to future contingencies. If the amount of an expenditure is not		
known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees	[] _\$
Printing and Engraving Costs	[] \$
Legal Fees	[x] \$ 22,000
Accounting Fees	Ī] \$
Engineering Fees	_] \$
· · · · · · · · · · · · · · · · · · ·	-	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Sales Commissions (specify finders' fees separately) Other Expenses (identify): Finders' fees Total		[] \$ [x] \$ 55,025 [x] \$ 77,025
b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$ 1,023,482
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.		
	Payments to Officers, Directors, & Affiliates	Payments to Others
Salaries and fees Purchase of real estate Purchase, rental or leasing and installation of machinery and equipment	[] <u>\$</u> [] \$	[] <u>\$</u> [] <u>\$</u>
Construction or leasing of plant buildings and facilities Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		[] \$
Repayment of indebtedness	[] <u>\$</u> [] <u>\$</u> [] <u>\$</u>	[] \$ [] \$ [x] \$1,023,482
Column Totals	[]	[] \$ [x] \$1,023,482 3,482

D.	FED	FR	۸T.	SIGN	A'	THR	E

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature 43	Date
Volicon Inc.	Cly	April 9 , 2007
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Eli Warsawski	President	

ATTENTION	4 5				
Intentional misstatements or omissions of fact constitute federal criminal violations.					
(See 18 U.S.C. 1001.)					

